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APPLICANTS

Brian O'Holloran, Bend, OR;

Patrick J. Ferguson, Portland, OR;

** CONTINUING DATA *****

This application is a CON of 09/313,881 05/18/1999 PAT 6,235,001

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

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|---|----------------------|--------------|--------------|-------------|
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no | STATE OR | SHEETS | TOTAL | INDEPENDENT |
| 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance | COUNTRY OR | DRAWING 4 | CLAIMS 27 | CLAIMS 4 |
| Verified and Acknowledged | Examiner's Signature | Initials | | |

ADDRESS

29941

GLENN C. BROWN, PC

777 NW WALL STREET, SUITE 308

BEND, OR

97701

TITLE

SURGICAL NEEDLE WITH HAND-ACTUABLE LOCK MECHANISM

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|----------------------------|---|--|
| FILING FEE RECEIVED | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees |
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